

**FAQ - DHHS Systems Change Work**  
February 2022

	Topic	Question	Response
1	Area Agencies	What is the impact of the system work on Area Agencies?	As part of the system work, the Department is not currently enacting direct change to the structure of Area Agencies.  Area Agencies remain an important stakeholder group and are involved in the decision-making process around rate and waiver structure changes. We are also working with the Area Agencies (AAs) to respond to the Centers for Medicaid and Medicare's corrective action plan whereby AAs cannot provide case management services and also be a service provider to the same person. As a result, AAs must make a decision as to how they wish to operate going forward, and such decisions would also play an important role in how the system evolves going forward.
2	Assessment Tools	What are the assessment tools that will be used to determine support need?	The Department conducted a review of available and appropriate assessment tools best suited for its waiver programs. As of January 2022, the Department is moving forward with the use of the Supports Intensity Scale (SIS) to develop new rates. This SIS may or may not be used for budgeting beyond the initial rate-setting assessment. Additional information will be shared when it becomes available.
3	Assessment Tools	Will everyone who is currently served be reevaluated?	It is likely that prior to implementing new rates built on assessment results, new assessments will be needed for everyone currently receiving services. While additional review of current assessment data will be needed prior to finalizing that decision, potential changes in some assessment questions may result in the need for reassessment. Outside of this work, the Department anticipates maintaining the current reassessment schedule of every five years or when a significant life change occurs.
4	Assessment Tools	Will the Summer of 2022 SIS Assessment Sample Collection impact budgets?	The SIS sample being collected by AAIDD will not directly impact an individual's current budget. These assessments are being collected to support development of a new rate model and support level structure. Moving forward, as the new rates and support levels are implemented, the SIS assessment will impact the resources someone has access to. Sample selection will work to identify individuals who are due for a 5-year reassessment to reduce any duplication in efforts. Information collected from those assessments will be available to the person's Service Coordinators to support Service Agreement development under current processes.
5	Assessment Tools	What qualifications will the 2022 SIS Assessment Sample interviewers have?	Given the importance that the Supports Intensity Scale (SIS) will play in the development of a new rate schedule, DHHS has decided to leverage the extensive expertise and experience of the American Association on Intellectual and Developmental Disabilities (AAIDD). AAIDD is the developer and owner of the SIS. In this role, AAIDD is uniquely familiar with not only the assessment questions, but question intent and national best practices in assessment. NH has a longstanding history of using the SIS and working with AAIDD over the past 10+ years. As the leading training and assessor reliability testing body, DHHS feels that this will ensure a strong sample to support rate development work.
6	Assessment Tools	How will the Department work with families to ease the burden of participating in the sample?	DHHS is committed to supporting families in accessing and using services to meet their needs while reducing any undue burden. As a SIS sample is selected, DHHS will work with Area Agencies and CSNI to first identify individuals who are due for their 5-year renewal SIS assessment to be included in the sample to reduce duplicative efforts. Further, individuals selected for the sample who fall outside of the 5-year reassessment group will have an opportunity to decline the assessment. However, DHHS is committed to gathering as much relevant, representative data as possible to inform rate development. It is the hope of DHHS that individuals and families will see the sample process as an opportunity to ensure their needs – or those of their family member(s) – are directly represented in this process.
7	Assessment Tools	Does using an assessment tool put the values of person-centered planning and individualized budgeting at risk?	It's important to recognize that the SIS is meant to <i>inform</i> an individual's budget, not <i>set</i> an individual's budget. New Hampshire currently uses the SIS as a part of person-centered planning. In the future, New Hampshire will use an assessment tool as one part of the budgeting process for individuals. This is meant to help the State align a person's level of need with the service rates. Person-centered Planning, through accounting for someone's whole life and natural supports, will identify service needs to best support each person to achieve their personally-defined outcomes.
8	Assessment Tools	What is the SIS?	The Supports Intensity Scale (SIS) is one of many assessment tools that are used to measure an individual's level of support need to participate in community life. The SIS was developed by the American Association on Intellectual and Developmental Disabilities (AAIDD). 26 different states and provinces have adopted the SIS. The SIS has been normed and validated and is known for measuring support needs rather than deficits of an individual. New Hampshire has been using the SIS for over 10 years to assist in Individual Support Agreement (ISA) development.
9	Assessment Tools	If NH is going to base budgets on a needs assessment, does that mean that budgets will be based only on quantitative (number-based) medical scores?	No. While the SIS does collect data encompassing many aspects of a person's life, such as activities of daily living, self-advocacy, community engagement, etc., some factors such as activities of daily living, medical support needs and behavioral support needs have the highest relationship to the amount of support (and the cost of support) an individual may need. In addition, the state is working with the Systems Work Steering Committee to review and determine what supplemental questions might be added to the SIS to improve the tool's ability to capture support needs. The information collected through the SIS process will establish the rate for services to support someone's needs. However, the SIS process will not replace the importance of Person-Centered Planning to determine which services best align with someone meeting their individually-determined goals and outcomes. To support this process further, the department is collecting information from the Systems Work Groups about what sort of exception process is needed to supplement the use of a needs assessment.
10	Community/Staff Impact	What impacts (including those on wages) will the system work have on DSPs, program managers, and other staff?	While it is not yet known all of the ways DSPs will be impacted in and by this work, the Department believes that DSPs must be fairly compensated and that adjustments be made accordingly. Part of the expense to do that will come from making adjustments within the current allocation process such as returning high-cost placements from out-of-state and reinvesting those funds in to community base placements in NH, as well as developing community based supports that could prevent the need for more expensive interventions.  We are committed to keeping DSPs and other members of the support community central in this work. Specifically, we are excited to modernize our rate reimbursement structure in this process by emphasizing the role of direct support as the basis of rates. We stay committed to supporting DSPs and providers in their efforts to recruit and retain highly qualified staff to support people with developmental disabilities. The Department understands that stabilizing the DSP workforce will take a comprehensive approach given the complexity of the work and critical nature of the work performed by DSPs. To support development of options during this opportunity to modernize services and rates, BDS is developing a DSP Workforce Subcommittee tasked with developing recommendations to support planned rate development work. It is the hope of the Department that the subcommittee, using their diverse backgrounds and experiences, will bring innovative options forward to support - in a long-term, sustainable approach - the DSP workforce across the state, supporting all people with developmental disabilities and their families.
11	Community/ Staff Impact	What work is being done to increase DSP supply in New Hampshire?	The Department recognizes that DSP supply has been a challenge in New Hampshire and across the country. In response to this, The Systems work groups decided in January of 2022 to form a DSP Workforce Development subcommittee. This subcommittee is investigating workforce development options and will bring recommendations to the Department, the work groups, and the rate vendor for consideration. The Department is committed to using this opportunity to modernize the service delivery system to identify and enact meaningful, sustainable workforce solutions to grow the DSP footprint across the State.

12	Community/Staff Impact	Will current individual service plans be redone?	The Department is committed to minimizing disruptions for the Developmental Services system. Eventually, everyone in New Hampshire will be operating under the new structure (new rates, revised waiver services, , etc.) However, these changes are going to be implemented over the course of many years, and individuals should expect their service plans to be completed on their usual schedule.
13	Family Engagement	Will / How will families and individuals be included in the system work?	Individuals and families are key to all DHHS initiatives. As the most impacted group touched by these changes, we are excited to stay actively engaged with individuals and families. We are actively developing structures to support this, including participation in work groups, bi-monthly information sessions, and content resources and information posted to our dedicated webpages and social media pages.
14	Family Engagement	How can families connect with each other?	The Department recommends that families reach out to existing family support organizations in the state. These include <a href="#">New Hampshire Family Voices</a> and the 10 regional Family Support Councils.
15	Funding	Will / How will funding for existing services be impacted by this system work?	Myers and Stauffer, the rate vendor is expected to begin work with the Department in February of 2022. Myers and Stauffer brings an internal actuary that will work directly with Area Agencies and Private Providers to conduct cost reporting, analysis and discussion around how to build a rate methodology in alignment with the “brick build” model outlined in the A&M Operations Assessment. Once a rate methodology is finalized, an implementation plan of new rates will be developed to transition service reimbursement to the new rates. While this implementation plan has not yet been developed, it will focus on the goal of aligning assessed need with funding to support individuals and families and a plan that allows Area Agencies and providers a smooth transition to the new rates.
16	General	What is the timing of work group committee selections? Will there be future opportunities to join in the work group structure?	<p>The Department has selected and is currently engaging three initial work groups in dialogue and feedback around its rate and waiver structure work. At this time, all work group seats are filled, but we will periodically reach out to interested stakeholders to fill newly added or vacated seats.</p> <p>Members of the public will also have the opportunity to attend and listen to these work group discussions, live, and provide feedback by email.</p>
17	General	Is the A&M and BDS system work about cost savings?	<p>The BDS Systems Work is not about cost savings (i.e., cutting services or funding), but working to ensure equitable access, across the state, the right type and amount of supports to individuals and families to their personally identified outcomes as their needs change over time.</p> <p>DHHS is undertaking multiple initiatives to modernize the services and systems used to support individuals with developmental disabilities to access community-based services. This work will focus on promoting equitable access to resources across the state while ensuring service providers are available and able to provide high-quality supports. The initiatives are focused on promoting quality of care for people with disabilities while ensuring a sustainable service system for the future.</p> <p>A key component of this system work is also focused on investments in Information Technology (IT). Modernization of our IT systems will help us to more accurately provide the NH Legislature with a better understanding of how services are utilized and the cost of care. We will need an advocacy and communication strategy to continue to seek the resources we need.</p>
18	General	What is the timeline of the system work?	Please reference the preliminary implementation timelines found on the Systems Work Webpage. These timelines are tentative, subject to change, and updated regularly to reflect project changes.
19	General	What is the point of the Systems Work? What is the background of this work?	<p>The goal of the Department of Health and Human Services Systems Change Work is to improve the current service delivery system through the following initiatives:</p> <ul style="list-style-type: none"> <li>• Update the DD Waiver to offer services that are tailored to an individual’s specific needs;</li> <li>• Use a nationally vetted, evidence-based assessment process that is consistent across the state and conducted by a neutral third party to use as one of the tools to determine an individual’s need for services;</li> <li>• Develop rates for DD Waiver services that consider provider costs, staff credentialing and flexibility to address current and future cost-of-living needs; and,</li> <li>• Build provider capacity in the state to ensure that individuals with intensive behavioral or medical needs can receive these services locally, in the state of New Hampshire.</li> </ul> <p>The purpose of this work is to better meet the needs of the individuals and their families, while ensuring that provider agencies are reimbursed appropriately and equitably across the state. Additionally, DHHS is working on coming into compliance with CMS requirements relative to conflict of interest and provider direct billing. DHHS must come into compliance with these requirements by July 2023 to ensure that the State of NH continues receiving its Federal match for Medicaid Waiver Services.</p>
20	General	What states is the Department learning from when developing this work?	The Department is not modeling the Systems work off of one particular state but is reviewing information from across the country to help inform these changes. To date, some of the states we have researched include North Carolina, New York, Maryland, Rhode Island, Hawaii, Arizona, and South Dakota.
21	General	What data analysis led to these policy changes?	For years, The Department has investigated funding and service delivery trends for people with DD. For a complete review of the most recent work completed, please see the <a href="#">November 2020 Operations Assessment</a> .
22	General	This is about more than just Conflict of Interest Compliance. Is the goal to cap services?	The goal of this work is to promote improved access to resources and services across the state. This work is driven first and foremost by ensuring equal access to resources to support the individual needs of people with developmental disabilities and their families. This includes ensuring a quality, qualified provider network is available and able to support service delivery through an updated reimbursement rate schedule. DHHS and its stakeholders will work to build processes that support the alignment of individual need with access to funding and services to meet those needs.
23	General	How will this work fix capacity issues in the system?	<p>The work being undertaken will address current capacity challenges in the system in a number of ways; including:</p> <ul style="list-style-type: none"> <li>• Modernizing IT systems to improve the flow of information;</li> <li>• Development of a rate reimbursement schedule formed around direct support wages to promote workforce growth and provider fiscal stability; and,</li> <li>• A waiver structure and services that are focused on community access, supporting families and agility to support the changing needs of a person's life.</li> </ul>
24	General	Are there planned changes to RSA 171-A.	The department understands that some of the changes made throughout the Systems Work might require updates to rule or statute. The department will consider revisions as the work evolves but is not currently drafting RSA 171-A revisions.
25	General	How is CMS involved?	The Centers for Medicare & Medicaid Services (CMS) is the federal agency that makes laws about, and provides matched-funding for services for people with developmental disabilities. As with any Waiver revision process, CMS will review changes to the rates and services to make sure that the revisions meet CMS standards. CMS is also providing guidance to the state about how to comply with direct bill and conflict-of-interest mitigation requirements.
26	Rate Development	How will the new rates be different from what we have now?	The new rate schedule will be predictable, transparent, fair, objective, standardized, and consistent. A new rate matrix will meet compliance standards. To achieve these goals, rates will be developed in a new way. First, the Department is going to use a standardized assessment tool to gather data. This data is going to help the state understand what services people need; it will serve as the baseline for rate development. Then, the Department (with the help of Myers and Stauffer) is going to gather cost (and other) information to build a rate matrix that will help providers cover the costs of providing services and help individuals have access to funding for services. Importantly, under the new rates, DSP wages will serve as the base component providing a direct investment in equitable, clear wages for this critical workforce.

27	Rate Development	Will the new rates take into account inflation, new DSP wages, cost of living adjustments, rural/urban concerns, or other variable factors?	Yes. The Department is committed to developing improved rates that do account for some of these factors. Moving forward, the rate vendor will work to understand cost structures in New Hampshire and what factors should be included. DHHS' final decision about rate factors will be based on the work of the rate vendor and input from stakeholders. Rates will also be dependent upon the funding available to the system as decided by the State legislature.
28	Rate Development	How are the new rates going to be developed? Is the department conducting a rate study?	As of February 2022, the Department is working to onboard Myers and Stauffer, a rate-setting vendor. This vendor will work with the state to collect provider cost information, and other data. Additionally, the Systems Work Rate and Waiver Work Groups will provide recommendations to the rate setting vendor and the state about service definitions, provider qualifications, and other rate-impacting factors. Eventually, a new rate matrix, based on a build-up of key service delivery costs will be developed and shared with the community.
29	Technology	How will the system work affect other ongoing activities like the rollout of Electronic Visit Verification?	The Department continues to collaborate and coordinate with ongoing efforts across DHHS. Project timelines, project plans and project resources are continuously evaluated to ensure all critical activities and initiatives are appropriately planned for.
30	Waiver Services	Will the system work incentivize residential placement?	No. The system work does not and will not incentivize residential placement. The Department seeks a system where, through strong case management, individuals have access to a broader array of services and supports that best meet their individual support needs appropriately.
31	Waiver Services	How will services be differentiated between the comprehensive and support waivers?	<p>A supports waiver is designed to complement and reinforce natural supports that are most often provided at home with family members and friends.</p> <p>A comprehensive waiver includes services provided to individuals who require more intensive care. Services in a comprehensive waiver are designed to maximize an individual's independence while encouraging inclusion into the community – with additional capacity for comprehensive, complex supports.</p> <p>To determine which services will be included in each waiver, the Department has engaged a waiver work group, which is meeting monthly to participate in discussions around the appropriate service allocation between a comprehensive and supports waiver. Members of the public will also have the opportunity to attend and listen to these work group deliberations, live, and provide feedback by email.</p>
32	Waiver Services	Will the system work include changes to other waivers?	At this time, the department is not considering changes to other waivers outside of those outlined in the recommendations of the A&M Phase 1A report.